

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
08-CA-264766	8-17-2020

File an original of this charge with NLRB Regional Director in which the alleged unfair labor practice occurred or is occurring.

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer University Hospitals		b. Tel. No. (b) (6), (b) (7)(C)
		c. Cell No.
d. Address (street, city, state ZIP code) (b) (6), (b) (7)(C)	e. Employer Representative (b) (6), (b) (7)(C)	f. Fax No.
		g. e-Mail
		h. Dispute Location (City and State) (b) (6), (b) (7)(C)
i. Type of Establishment (factory, nursing home, hotel) hospital	j. Principal Product or Service healthcare services	k. Number of workers at dispute location approx. 85
l. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1), of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.		
2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) See Attachment		

3. Full name of party filing charge (if labor organization, give full name, including local name and number)

(b) (6), (b) (7)(C)	
4a. Address (street and number, city, state, and ZIP code) (b) (6), (b) (7)(C)	4b. Tel. No. (b) (6), (b) (7)(C)
	4c. Cell No. (b) (6), (b) (7)(C)
	4d. Fax No.
	4e. e-Mail (b) (6), (b) (7)(C)
5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization)	
6. DECLARATION I declare that I have read the above charge and that the statements are true to the best of my (b) (6), (b) (7)(C)	Tel. No. (b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)	Office, if any, Cell No. (b) (6), (b) (7)(C)
Print Name and Title	Fax No.
Address: (b) (6), (b) (7)(C)	e-Mail (b) (6), (b) (7)(C)
Date: 8-9-2020	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)**PRIVACY ACT STATEMENT**

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

(b) (6), (b) (7)(C)

RECEIVED
NLRB REGION 8
AUG 17 PM 12:41
CLEVELAND, OHIO

Attachment to the Charge

Since on or about (b) (6), (b) (7)(C) 2020, the above named Employer, through its officers, agents, and representatives, has interfered with, restrained, and coerced, and is interfering with, restraining, and coercing its employees, in the exercise of their rights to self-organization, to form, join or assist labor organizations, to bargain collectively through representatives of their own choosing, and to engage in other concerted activities for the purpose of collective bargaining or other mutual aid or protection, or to refrain from any or all such activities, which rights are guaranteed in Section 7 of the said Act, by issuing its employee (b) (6), (b) (7)(C) a final written discipline because (b) (6), (b) (7)(C) engaged in protected concerted activities, and by causing its employee (b) (6), (b) (7)(C) because (b) (6), (b) (7)(C) engaged in protected concerted activities.

RECEIVED

MAR 17 2020

RECEIVED
MAR 17 2020



UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

REGION 8
1240 E 9TH ST
STE 1695
CLEVELAND, OH 44199-2086

Agency Website: www.nlr.gov
Telephone: (216)522-3715
Fax: (216)522-2418



Download
NLRB
Mobile App

July 16, 2020

By email:

(b) (6), (b) (7)(C)

Re: University Hospitals

Dear (b) (6), (b) (7)(C):

Attached is a Charge Against Employer form. If you wish to file this charge with us, please do the following:

- ✓ Make any necessary corrections on the form
- ✓ Fill in any incomplete spaces
- ✓ Sign and date the form where indicated at the bottom
- ✓ Return the form to the above address or fax number

You may also wish to keep a copy of the charge for yourself. Once we receive a signed charge from you, we will give it a case number and assign a Board agent to investigate the case. We will then send you a letter telling you the case number and the name of the investigator.

Please remember that to be timely, your charge must be filed and served on the charged party within six months of the alleged unlawful actions. We normally send a copy of the charge to the charged party, but if you are running close to the 6-month deadline, be advised that it is your responsibility to see that the Employer receives a copy of the charge within the 6-month period. Feel free to contact me if you have any questions or need further assistance. If I am not in, please ask to speak to the Information Officer.

Sincerely,

/s/ Aaron Sukert
Field Attorney

Enclosure

.

From: (b) (6), (b) (7)(C)
Sent: Wednesday, August 5, 2020 7:40 PM
To: Sukert, Aaron
Subject: Re: IO Charge - UH (b) (6), (b) (7)(C) for email and mail out
Attachments: (b) (6), (b) (7)(C) Letter.docx; IMG_3441.jpg; IMG_3442.jpg; IMG_3440.jpg

Hi Aaron,

Thank you for getting back to us so quickly. We did not receive anything in the mail. You do have the correct mailing address. (b) (6), (b) (7)(C) wants me to attach the letter that we sent to (b) (6), (b) (7)(C) and the write up that (b) (6) received.

(b) (6) will call you tomorrow.

Thank You
(b) (6), (b) (7)(C)

On Wed, Aug 5, 2020 at 4:30 PM Sukert, Aaron <Aaron.Sukert@nlrb.gov> wrote:

(b) (6), (b) (7)(C)

Please also feel free to have (b) (6), (b) (7)(C) contact me with any questions by phone at (216) 303-7389. If I am not available, when you leave a message, please indicate (b) (6) availability for a call back.

Thank you.

Sincerely,

Aaron Sukert

From: Sukert, Aaron
Sent: Wednesday, August 5, 2020 4:28 PM
To: (b) (6), (b) (7)(C) >
Subject: FW: IO Charge - UH (b) (6), (b) (7)(C) for email and mail out

Dear (b) (6), (b) (7)(C):

Our office emailed and mailed out the attached charge and cover letter on July 16, 2020. Attached is another copy. Please let me know if you receive this and are able to print it out. If you are not able to print it out, and

need it remailed, please indicate if the address on the cover letter and charge are correct. If (b) (6), (b) (7)(C) already signed the charge and mailed back or faxed back to us, please let me know the date that (b) (6) did so, and I will alert our office to look for it. If the spelling of (b) (6), (b) (7)(C) name needs to be corrected, and you are filing the attached, please make any corrections and initial.

Thanks,

Aaron Sukert

Aaron B. Sukert

Field Attorney

National Labor Relations Board, Region 8

Anthony J. Celebrezze Federal Building

1240 E. Ninth Street, Room 1695

Cleveland, OH 44199-2086

Direct Dial: (216) 303-7389

Facsimile: (216) 522-2418

The NLRB requires all parties to file documents electronically through our online E-File system

.

From: Sukert, Aaron
Sent: Wednesday, August 5, 2020 4:28 PM
To: (b) (6), (b) (7)(C)
Subject: FW: IO Charge - UH (b) (6), (b) (7)(C) for email and mail out
Attachments: CHG (b) (6), (b) (7)(C) 7-16-2020.pdf; LTR.Letter Sending Out Charge for
Signature (b) (6), (b) (7)(C) 7-16-2020..docx; CHG (b) (6), (b) (7)(C) 7-16-2020..docx

Dear (b) (6), (b) (7)(C):

Our office emailed and mailed out the attached charge and cover letter on July 16, 2020. Attached is another copy. Please let me know if you receive this and are able to print it out. If you are not able to print it out, and need it remailed, please indicate if the address on the cover letter and charge are correct. If (b) (6), (b) (7)(C) already signed the charge and mailed back or faxed back to us, please let me know the date that (b) (6) did so, and I will alert our office to look for it. If the spelling of (b) (6), (b) (7)(C) name needs to be corrected, and you are filing the attached, please make any corrections and initial.

Thanks,
Aaron Sukert

Aaron B. Sukert
Field Attorney
National Labor Relations Board, Region 8
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To Whom It May Concern,

My name is (b) (6), (b) (7)(C). On Friday (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)) called me into the office to give me a corrective action regarding (b) (6), (b) (7)(C)

I would like to address this incident as it specifically led to a negative outcome. An outcome I would like to mitigate. This situation concerns me deeply as I had hoped to retire as a UH employee.

I would like to communicate my side of the story as it has not been properly conveyed. The only "representation" of the facts was given to HR by a member(s) of the Sodexo management team.

Please refer to the corrective action for the following-

- I was never given an opportunity to relay my side of the story to anyone outside of the Sodexo management team
- There was an 8-day span between the date of the initial conversation regarding the incident and the issuance of the corrective action with no communication in regard to this action
- I was falsely accused or facts were misrepresented in the action which will be addressed below.
- I feel that due to being someone who has outlined a number of deficiencies that were and are in need of correction I was targeted by management which will be outlined below.

What occurred on 6/29/20 @ 1:43pm, Lakeside Building, Room 5559

1. Work order was issued and originally assigned to the (b) (6), (b) (7)(C) on call".
2. (b) (6), (b) (7)(C) on call" could not respond in a timely fashion, that is when I volunteered to respond to the call.
3. Upon arrival, contact was made with (b) (6), (b) (7)(C) regarding the issue.
4. (b) (6), (b) (7)(C) then informed me and my partner that the patient was indeed a Covid-19 positive patient.
5. I then informed (b) (6), (b) (7)(C) that I did not have the proper training/PPE required to perform work inside of a Covid patient room.
6. No PPE was offered, nor PPE stations were visible at this time.
7. (b) (6), (b) (7)(C) then called (b) (6), (b) (7)(C).
8. A (b) (6), (b) (7)(C) was dispatched to the location.

9. I had a discussion with (b) (6), (b) (7)(C), and we agreed upon a solution. (b) (6), (b) (7)(C) did not express any disagreement or displeasure with the agreed upon solution.
10. I and my partner stayed onsite to ensure the connection was performed properly by someone who was familiar with the Covid-19 standards and wearing the proper PPE.
11. All parties seemed pleased with the outcome.
12. Upon completion I went back to the office/shop area and ran directly into the (b) (6), (b) (7)(C). I then communicated the detail of what occurred directly to (b) (6), (b) (7)(C). (This took place at approximately 2:50 pm of (b) (6), (b) (7)(C).)

In the corrective action it states I refused to perform the work. That is untrue. What I did refuse to do was enter a Covid-19 patient room without our department being properly trained in Covid-19 specific infection control measures and lacking in Covid-19 specific protective equipment. In prior communications from management we were instructed not to enter a Covid-19 patient's room unless there was a dire emergency (flood/fire). This was specifically addressed in a "town hall" style meeting with our department by (b) (6), (b) (7)(C) at the beginning of the pandemic.

In the corrective action it states that (b) (6), (b) (7)(C) was not informed until a complaint was lodged. I was operating under the assumption that the managers communicated frequently, and that the issue was conveyed from (b) (6), (b) (7)(C) to (b) (6), (b) (7)(C) after speaking to (b) (6), (b) (7)(C) directly after the incident.

In the corrective action it states that there was a "follow up" investigation. Pictures were shown to me of PPE "stations". The fact is those stations were not present at the time of the incident. I was not given a fair opportunity to relay the facts of the incident to anyone outside of the Sodexo management team and was not given the opportunity to have a witness to the "closed door" interview that occurred on (b) (6), (b) (7)(C)/2020

I received no opportunity to bring these facts to light outside of Sodexo management. There was no opportunity to speak to HR or have witnesses relay what happened (b) (6), (b) (7)(C)/20

As I have stated before, this situation concerns me deeply as I hoped to retire as a UH employee. The levels of Sodexo management initiated half measures and short cuts to accomplish service work, the severe lack of communication, lack of Covid specific PPE/training and subtle intimidation that I have experienced the last few months has led me to believe that I was not a valued employee in any way shape or form. I acted brashly, and do not wish to terminate my employment with University Hospitals.

To expand on why I felt intimidated and that I was in a hostile work environment the last few months a brief work history is in order.

- I have been a (b) (6), (b) (7)(C) since (b) (6), (b) (7)(C)
- My experiences range from service to commercial construction.
- (b) (6), (b) (7)(C) Local Union 55.
- (b) (6), (b) (7)(C) on multiple large projects.
- Came to UH (actively recruited) to work in team development with management at that time.
- Performed multiple functions at UH, including construction quality assurance, service and projects.
- Asked by the current management team if I would be interested in becoming part of management, (b) (6), (b) (7)(C), develop interview standards for (b) (6), (b) (7)(C) management new hires, performed as subject matter expert on multiple projects, received 8% in raises during my tenure, and continually commended by management and clinical staff on performance/professionalism.

That being stated, I was stunned to learn this issue developed into a "final" corrective action. Based on the events of the last few months the only conclusion I was able to come to was that I was targeted for the following reasons

1. I was constantly asked to provide temporary repairs in lieu of following up to properly make the repairs needed (per Ohio State Code) to properly alleviate the problems so they wouldn't arise again. This happened so often that I felt the half measures were attempts to show the hospital that money was being saved. When in reality the issue would return and cost more in the end.
2. Being tasked to perform "in-house" projects I noticed on multiple occasions that managers appeared to be checking on our start/stop times, break durations and if I was going to the projects that were assigned to me. This was never experienced in the past.
3. In order to initiate cost savings, all overtime was eliminated. The problem is not that the overtime was eliminated but the communications and scheduling from management was lacking. For example, if a shutdown or project was scheduled there was no follow up on the status of the project to the front-line techs (if the project was proceeding). There were more than a few occasions that the jobs could not be manned because techs had approved/scheduled PTO that conflicted with the projects.
4. I lodged multiple complaints concerning the above.
5. I lodged multiple complaints concerning the lack of Covid specific PPE/training.

6. I lodged multiple complaints concerning the lack of material and major delays on material procurement which has led to unnecessary patient facing room closures.
7. I lodged multiple complaints concerning lack of communication from the management to the frontline technicians.

There has been a noticeable change in behavior over the last two months towards me. A corrective action was classified as a "final" and I never had as much as a warning throughout the course of my employment at UH, actually quite the opposite as I outlined above. Another UH facilities team mate had done similar but received nothing but a "counseling" and the fact that I have been outspoken on management deficiencies in hopes of correction, I cannot help but think I am being targeted and I am being made an example of.

I am a firm believer in voicing concerns to my chain of command. Unfortunately, as far as the facts are concerned this situation has been very one sided. My experience as of late has not been much more than a hostile work environment fueled by management. Hence my brash response on Friday (b) (6), (b) (7)(C). I felt unwelcome and most certainly not a valued member of the team.

Regards,

(b) (6), (b) (7)(C)



I. EMPLOYEE DATA

First Name

(b) (6), (b) (7)(C)

M.I

Last Name

(b) (6), (b) (7)(C)

Employee Number

(Enter exactly as in Oracle)

(b) (6), (b) (7)(C)

Position

(b) (6), (b) (7)(C)

(b) (6), (b) (7)(C)

Year

(b) (6), (b) (7)(C)

Entity

Main Campus UH

Department

Facilities

(Check one)

☐

Confirmation of Counseling

☐

Warning

XXX

☐

Final Warning/Suspension

☐

Discharge

II. CIRCUMSTANCES

Dates of attendance or tardiness occurrences:

N/A

Describe the circumstances leading to the corrective action:

Refusal/Failure to complete work order (b) (6), (b) (7)(C) in patient room (b) (6), (b) (7)(C) On (b) (6), (b) (7)(C) 20 @ 1:43 pm

A COVID patient needed dialysis in room. (b) (6), (b) (7)(C) to allow the attachment of portable dialysis machine. Work order requested the (b) (6), (b) (7)(C) to allow attachment of dialysis machine.

(b) (6), (b) (7)(C) refused to enter COVID room to (b) (6), (b) (7)(C) Nurse staff called to dialysis department 2nd floor and requested (b) (6), (b) (7)(C) come to 5th floor. (b) (6), (b) (7)(C) from room across hall then proceeded to instruct (b) (6), (b) (7)(C) how to install it using (b) (6), (b) (7)(C) tools from outside room.

This action was not brought to (b) (6), (b) (7)(C) attention until 3days later by the dialysis department in a complaint.

In follow up investigation of complaint, (b) (6), (b) (7)(C) admitted to the refusal to work.

Please note the policy and procedure violated:

HR-63 – Professional Behavior

Key Points

- This policy applies to all UH workforce members.

Policy & Procedure

1. It is the duty of all workforce members to promote standards of professional behavior and a culture of safety. UH will not tolerate disruptive behaviors that may lead to undermined morale, diminished productivity, ineffective or substandard care/service or distress to others. This policy provides written standards for setting a positive UH professional image and a healthy work environment.

III. ACTION PLAN

Any work that is assigned to (b) (6), (b) (7)(C) must be done promptly and completely. If work cannot be completed as described it must immediately be communicated to a manger.

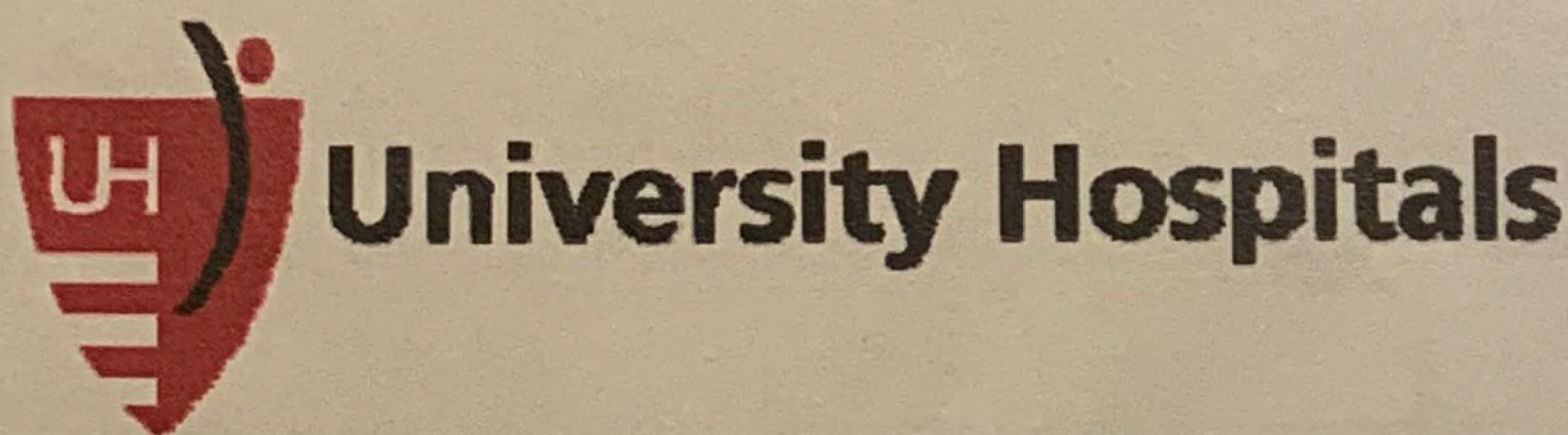
HR-72 – Corrective Action

Key Points

- This policy applies to University Hospitals (UH) regular full-time and part-time employees in non-supervisory positions who have completed their initial employment periods.

Definition

Corrective Action:
Describes the levels of conduct which deviates from those expected of University Hospitals' employees and the prescribed procedures to be followed when levels deviate from expected standards.



Corrective Action

IV. EMPLOYEE COMMENTS

V. SIGNATURE OF ACKNOWLEDGMENT

I understand that I may contact an HR representative to discuss questions or concerns related to this document including optional complaint resolution steps. Other than in cases of discharge, should the performance concerns outlined in this document continue, additional corrective action up to and including discharge may occur.

Employee Signature

Date

(b) (6), (b) (7)(C)

Date

(b) (6), (b) (7)(C)

[Redacted]

-20

PLEASE RETURN THIS FORM TO YOUR LOCAL HUMAN RESOURCES DEPARTMENT

.

From: Sukert, Aaron
Sent: Thursday, August 6, 2020 11:39 AM
To: (b) (6), (b) (7)(C)
Subject: RE: IO Charge - UH (b) (6), (b) (7)(C) -please respond to email

Thanks

From: (b) (6), (b) (7)(C)
Sent: Thursday, August 6, 2020 10:52 AM
To: Sukert, Aaron <Aaron.Sukert@nrlb.gov>
Subject: Re: IO Charge - UH (b) (6), (b) (7)(C) -please respond to email

Good morning

I was able to print it out. I will have (b) (6), (b) (7)(C) sign after work and get it sent out.

Thank you again for your time.

(b) (6), (b) (7)(C)

On Thu, Aug 6, 2020, 8:45 AM Sukert, Aaron <Aaron.Sukert@nrlb.gov> wrote:

(b) (6), (b) (7)(C):

Thank you for your email back. To initiate an investigation of an unfair labor practice, (b) (6), (b) (7)(C) would need to first file a charge with our agency. (b) (6), (b) (7)(C) would need to sign and date the charge form, as indicated under "6. Declaration," and then file by mail, fax or e-filing to the NLRB, Region 8. If you are not able to print out the charge I resent by email yesterday, then please let me know and we will mail it out again to you at the confirmed address. After we receive a charge, our office docket the charge (assigns a case # and Board Agent to investigate the case). The Region then notifies the Charging Party of the assigned Board Agent. Once a Board agent has been assigned, (b) (6), (b) (7)(C) should re-send the documentation you emailed last evening to the assigned Board Agent. (Please note that by sending me the documentation last evening it does not provide it to the Region for purposes of the investigation). If you have any questions or need any assistance, please feel free to contact me at (216) 303-7389. Our fax # is: (216) 522-2418. *Please email back what (b) (6), (b) (7)(C) plans to do (i.e., mail back, fax, or e-file) and if you require us to re-send the charge by mail or if you are able to print it out.*

Thank you.

Sincerely,

Aaron B. Sukert

Aaron Sukert

Field Attorney

NLRB, Region 8

Phone: (216) 303-7389

Facsimile: (216) 522-2418

From: (b) (6), (b) (7)(C)
Sent: Wednesday, August 5, 2020 7:40 PM
To: Sukert, Aaron <Aaron.Sukert@nlr.gov>
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(b) (6) will call you tomorrow.

Thank You

(b) (6), (b) (7)(C)

On Wed, Aug 5, 2020 at 4:30 PM Sukert, Aaron <Aaron.Sukert@nlr.gov> wrote:

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Thank you.

Sincerely,

Aaron Sukert

From: Sukert, Aaron

Sent: Wednesday, August 5, 2020 4:28 PM

To: (b) (6), (b) (7)(C)

Subject: FW: IO Charge - UH (b) (6), (b) (7)(C) for email and mail out

Dear (b) (6), (b) (7)(C)

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Thanks,

Aaron Sukert

Aaron B. Sukert

Field Attorney

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Cleveland, OH 44199-2086

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----- Forwarded message -----

From: "Sukert, Aaron" <Aaron.Sukert@nlrb.gov>

To: (b) (6), (b) (7)(C)

Cc:

Bcc:

Date: Wed, 5 Aug 2020 20:30:42 +0000

Subject: RE: IO Charge - UH (b) (6), (b) (7)(C) for email and mail out

(b) (6), (b) (7)(C)

Please also feel free to have (b) (6), (b) (7)(C) contact me with any questions by phone at (216) 303-7389. If I am not available, when you leave a message, please indicate (b) (6), (b) (7)(C) availability for a call back.

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----- Forwarded message -----

From: "Sukert, Aaron" <Aaron.Sukert@nlrb.gov>

To: (b) (6), (b) (7)(C)

Cc:

Bcc:

Date: Wed, 5 Aug 2020 20:28:15 +0000

Subject: FW: IO Charge - UH (b) (6), (b) (7)(C) for email and mail out

Dear (b) (6), (b) (7)(C):

Our office emailed and mailed out the attached charge and cover letter on July 16, 2020. Attached is another copy. Please let me know if you receive this and are able to print it out. If you are not able to print it out, and need it remailed, please indicate if the address on the cover letter and charge are correct. If (b) (6), (b) (7)(C) already signed the charge and mailed back or faxed back to us, please let me know the date that (b) (6) did so, and I will alert our office to look for it. If the spelling of (b) (6), (b) (7)(C) name needs to be corrected, and you are filing the attached, please make any corrections and initial.

Thanks,

Aaron Sukert

Aaron B. Sukert

Field Attorney

National Labor Relations Board, Region 8

Anthony J. Celebrezze Federal Building

1240 E. Ninth Street, Room 1695

Cleveland, OH 44199-2086

Direct Dial: (216) 303-7389

Facsimile: (216) 522-2418

The NLRB requires all parties to file documents electronically through our online E-File system



UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

REGION 8
1240 E 9TH ST
STE 1695
CLEVELAND, OH 44199-2086

Agency Website: www.nlrb.gov
Telephone: (216)522-3715
Fax: (216)522-2418



Download
NLRB
Mobile App

August 18, 2020

(b) (6), (b) (7)(C)

Re: University Hospitals
Case 08-CA-264766

Dear (b) (6), (b) (7)(C)

The charge that you filed in this case on August 17, 2020 has been docketed as case number 08-CA-264766. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

Investigator: This charge is being investigated by Field Attorney NOAH FOWLE whose telephone number is (216)303-7364. If this Board agent is not available, you may contact Regional Director NORA F. MCGINLEY whose telephone number is (216)303-7370.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701, Notice of Appearance*. This form is available on our website, www.nlrb.gov, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

Presentation of Your Evidence: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

Preservation of all Potential Evidence: Please be mindful of your obligation to preserve all relevant documents and electronically stored information (ESI) in this case, and to

take all steps necessary to avoid the inadvertent loss of information in your possession, custody or control. Relevant information includes, but is not limited to, paper documents and all ESI (e.g. SMS text messages, electronic documents, emails, and any data created by proprietary software tools) related to the above-captioned case.

Prohibition on Recording Affidavit Interviews: It is the policy of the General Counsel to prohibit affiants from recording the interview conducted by Board agents when subscribing Agency affidavits. Such recordings may impede the Agency's ability to safeguard the confidentiality of the affidavit itself, protect the privacy of the affiant and potentially compromise the integrity of the Region's investigation.

Correspondence: All documents submitted to the Region regarding your case MUST be filed through the Agency's website, www.nlrb.gov. This includes all formal pleadings, briefs, as well as affidavits, documentary evidence, and position statements. The Agency requests all evidence submitted electronically to be in the form it is normally used and maintained in the course of business (i.e., native format). Where evidence submitted electronically is not in native format, it should be submitted in a manner that retains the essential functionality of the native format (i.e., in a machine-readable and searchable electronic format).

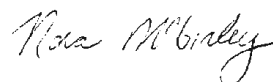
If you have questions about the submission of evidence or expect to deliver a large quantity of electronic records, please promptly contact the Board agent investigating the charge. If you cannot e-file your documents, you must provide a statement explaining why you do not have access to the means for filing electronically or why filing electronically would impose an undue burden.

In addition, this Region will be issuing case-related correspondence and documents, including complaints, compliance specifications, dismissal letters, deferral letters, and withdrawal letters, electronically to the email address you provide. Please ensure that you receive important case-related correspondence, please ensure that the Board Agent assigned to your case has your preferred email address. These steps will ensure that you receive correspondence faster and at a significantly lower cost to the taxpayer. If there is some reason you are unable to receive correspondence via email, please contact the agent assigned to your case to discuss the circumstances that prevent you from using email.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, www.nlrb.gov or from an NLRB office upon your request. *NLRB Form 4541, Investigative Procedures* offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,



NORA F. MCGINLEY
Acting Regional Director



UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

REGION 8
1240 E 9TH ST
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Download
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August 18, 2020

(b) (6), (b) (7)(C)

Re: University Hospitals
Case 08-CA-264766

Dear (b) (6), (b) (7)(C):

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

Investigator: This charge is being investigated by Field Attorney NOAH FOWLE whose telephone number is (216)303-7364. If this Board agent is not available, you may contact Regional Director NORA F. MCGINLEY whose telephone number is (216)303-7370.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701, Notice of Appearance*. This form is available on our website, www.nlrb.gov, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

Presentation of Your Evidence: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board

agent. Sending us your written account of the facts and a statement of your position is not enough to be considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor requests to limit our use of position statements or evidence. Specifically, any material you submit may be introduced as evidence at a hearing before an administrative law judge regardless of claims of confidentiality. However, certain evidence produced at a hearing may be protected from public disclosure by demonstrated claims of confidentiality.

Further, the Freedom of Information Act may require that we disclose position statements or evidence in closed cases upon request, unless an exemption applies, such as those protecting confidential financial information or personal privacy interests.

Preservation of all Potential Evidence: Please be mindful of your obligation to preserve all relevant documents and electronically stored information (ESI) in this case, and to take all steps necessary to avoid the inadvertent loss of information in your possession, custody or control. Relevant information includes, but is not limited to, paper documents and all ESI (e.g. SMS text messages, electronic documents, emails, and any data created by proprietary software tools) related to the above-captioned case.

Prohibition on Recording Affidavit Interviews: It is the policy of the General Counsel to prohibit affiants from recording the interview conducted by Board agents when subscribing Agency affidavits. Such recordings may impede the Agency's ability to safeguard the confidentiality of the affidavit itself, protect the privacy of the affiant and potentially compromise the integrity of the Region's investigation.

Correspondence: All documents submitted to the Region regarding your case MUST be filed through the Agency's website, www.nlr.gov. This includes all formal pleadings, briefs, as well as affidavits, documentary evidence, and position statements. The Agency requests all evidence submitted electronically to be in the form it is normally used and maintained in the course of business (i.e., native format). Where evidence submitted electronically is not in native format, it should be submitted in a manner that retains the essential functionality of the native format (i.e., in a machine-readable and searchable electronic format).

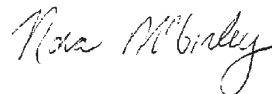
If you have questions about the submission of evidence or expect to deliver a large quantity of electronic records, please promptly contact the Board agent investigating the charge. If you cannot e-file your documents, you must provide a statement explaining why you do not have access to the means for filing electronically or why filing electronically would impose an undue burden.

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Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, www.nlr.gov or from an NLRB office upon your request. *NLRB Form 4541, Investigative Procedures* offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

A handwritten signature in cursive script, reading "Nora McGinley".

NORA F. MCGINLEY
Acting Regional Director

Enclosures:

1. Copy of Charge
2. Commerce Questionnaire

QUESTIONNAIRE ON COMMERCE INFORMATION

Please read carefully, answer all applicable items, and return to the NLRB Office. If additional space is required, please add a page and identify item number.

CASE NAME

CASE NUMBER

08-CA-264766

1. EXACT LEGAL TITLE OF ENTITY (As filed with State and/or stated in legal documents forming entity)**2. TYPE OF ENTITY**☐ CORPORATION ☐ LLC ☐ LLP ☐ PARTNERSHIP ☐ SOLE PROPRIETORSHIP ☐ OTHER (Specify)**3. IF A CORPORATION or LLC**A. STATE OF INCORPORATION
OR FORMATION

B. NAME, ADDRESS, AND RELATIONSHIP (e.g. parent, subsidiary) OF ALL RELATED ENTITIES

4. IF AN LLC OR ANY TYPE OF PARTNERSHIP, FULL NAME AND ADDRESS OF ALL MEMBERS OR PARTNERS**5. IF A SOLE PROPRIETORSHIP, FULL NAME AND ADDRESS OF PROPRIETOR****6. BRIEFLY DESCRIBE THE NATURE OF YOUR OPERATIONS (Products handled or manufactured, or nature of services performed).****7. A. PRINCIPAL LOCATION:****B. BRANCH LOCATIONS:****8. NUMBER OF PEOPLE PRESENTLY EMPLOYED**

A. Total:

B. At the address involved in this matter:

9. DURING THE MOST RECENT (Check appropriate box): ☐ CALENDAR YR ☐ 12 MONTHS or ☐ FISCAL YR (FY dates)

YES NO

A. Did you **provide services** valued in excess of \$50,000 directly to customers outside your State? If no, indicate actual value.
\$B. If you answered no to 9A, did you **provide services** valued in excess of \$50,000 to customers in your State who purchased goods valued in excess of \$50,000 from directly outside your State? If no, indicate the value of any such services you provided.
\$C. If you answered no to 9A and 9B, did you **provide services** valued in excess of \$50,000 to public utilities, transit systems, newspapers, health care institutions, broadcasting stations, commercial buildings, educational institutions, or retail concerns? If less than \$50,000, indicate amount. \$D. Did you **sell goods** valued in excess of \$50,000 directly to customers located outside your State? If less than \$50,000, indicate amount. \$E. If you answered no to 9D, did you **sell goods** valued in excess of \$50,000 directly to customers located inside your State who purchased other goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount.
\$F. Did you **purchase and receive goods** valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$G. Did you **purchase and receive goods** valued in excess of \$50,000 from enterprises who received the goods directly from points outside your State? If less than \$50,000, indicate amount. \$H. **Gross Revenues** from all sales or performance of services (*Check the largest amount*):☐ \$100,000 ☐ \$250,000 ☐ \$500,000 ☐ \$1,000,000 or more If less than \$100,000, indicate amount.I. **Did you begin operations within the last 12 months?** If yes, specify date: _____**10 ARE YOU A MEMBER OF AN ASSOCIATION OR OTHER EMPLOYER GROUP THAT ENGAGES IN COLLECTIVE BARGAINING?**☐ YES ☐ NO (If yes, name and address of association or group).**11. REPRESENTATIVE BEST QUALIFIED TO GIVE FURTHER INFORMATION ABOUT YOUR OPERATIONS**

NAME

TITLE

E-MAIL ADDRESS

TEL. NUMBER

12. AUTHORIZED REPRESENTATIVE COMPLETING THIS QUESTIONNAIRE

NAME AND TITLE (Type or Print)

SIGNATURE

E-MAIL ADDRESS

DATE

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and/or unfair labor practice proceedings and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary. However, failure to supply the information may cause the NLRB to refuse to process any further a representation or unfair labor practice case, or may cause the NLRB to issue you a subpoena and seek enforcement of the subpoena in federal court.

UNITED STATES OF AMERICA
BEFORE THE NATIONAL LABOR RELATIONS BOARD

UNIVERSITY HOSPITALS

Charged Party

and

(b) (6), (b) (7)(C)

Charging Party

Case 08-CA-264766

AFFIDAVIT OF SERVICE OF CHARGE AGAINST EMPLOYER

I, the undersigned employee of the National Labor Relations Board, state under oath that on August 18, 2020, I served the above-entitled document(s) by post-paid regular mail upon the following persons, addressed to them at the following addresses:

(b) (6), (b) (7)(C)

August 18, 2020

Date

Cassandra Jones, Designated Agent of
NLRB

Name

/s/ Cassandra Jones

Signature

.

From: Fowle, Noah
Sent: Tuesday, August 18, 2020 2:18 PM
To: (b) (6), (b) (7)(C)@UHhospitals.org
Subject: UH)

(b) (6), (b) (7)(C)

I am the investigating board agent for the above referenced charge, recently filed by (b) (6), (b) (7)(C). Please have your attorney file a notice of appearance, and I will direct all further correspondence through your attorney.

Noah Fowle
Field Attorney, NLRB – Region 8
1240 E. 9th Street, Room 1695
Cleveland, OH 44199-1086
216 303 7364 (office)
202 674 2311 (cell)
216 522 2418 (fax)
noah.fowle@nrlb.gov

.

From: Fowle, Noah
Sent: Tuesday, August 18, 2020 2:14 PM
To: (b) (6), (b) (7)(C)
Subject: RE: 08-CA-264766 (UH)

(b) (6), (b) (7)(C)

My apologies for getting your last name wrong. I also left you a pair of voicemails for "(b) (6), (b) (7)(C)".

Please call me when you receive this.

Noah Fowle
Field Attorney, NLRB – Region 8
1240 E. 9th Street, Room 1695
Cleveland, OH 44199-1086
216 303 7364 (office)
202 674 2311 (cell)
216 522 2418 (fax)
noah.fowle@nrlb.gov

From: Fowle, Noah
Sent: Tuesday, August 18, 2020 1:53 PM
To: (b) (6), (b) (7)(C)
Subject: 08-CA-264766 (UH)

(b) (6), (b) (7)(C)

I am the investigating board agent for the above referenced charge. Please call me at your earliest convenience to discuss the facts behind your allegations, set a schedule to take your sworn statement and to discuss any other witnesses or evidence you intend on presenting to support the charge allegations.

Noah Fowle
Field Attorney, NLRB – Region 8
1240 E. 9th Street, Room 1695
Cleveland, OH 44199-1086
216 303 7364 (office)
202 674 2311 (cell)
216 522 2418 (fax)
noah.fowle@nrlb.gov

.

From: Manson, Marcie <Marcie.Manson@UHHospitals.org>
Sent: Wednesday, August 19, 2020 12:03 PM
To: Fowle, Noah
Cc: (b) (6), (b) (7)(C)
Subject: 08-CA-264766 (UH)

Hello Mr. Fowle,

(b) (6), (b) (7)(C) forwarded the email below, but to my knowledge, UH has not received the Charge filed by (b) (6), (b) (7)(C). I will be the attorney for UH on this matter.

Please forward a copy to my attention, or if I missed an email, please advise and I will follow up.

Thank you.

Marcie

Marcie Manson
Deputy General Counsel
University Hospitals
Management Services Center
3605 Warrensville Center Rd.
Shaker Hts., Ohio 44122
Ph.: 216-767-8236 Fax: 216-767-8260

From: Fowle, Noah [<mailto:Noah.Fowle@nrlb.gov>]
Sent: Tuesday, August 18, 2020 2:18 PM
To: (b) (6), (b) (7)(C) <(b) (6), (b) (7)(C)@UHHospitals.org>
Subject: 08-CA-264766 (UH)

External E-mail: Careful opening links or attachments.

(b) (6), (b) (7)(C)

I am the investigating board agent for the above referenced charge, recently filed by (b) (6), (b) (7)(C). Please have your attorney file a notice of appearance, and I will direct all further correspondence through your attorney.

Noah Fowle
Field Attorney, NLRB – Region 8
1240 E. 9th Street, Room 1695
Cleveland, OH 44199-1086
216 303 7364 (office)
202 674 2311 (cell)
216 522 2418 (fax)
noah.fowle@nrlb.gov

Visit us at www.UHhospitals.org.

The enclosed information is STRICTLY CONFIDENTIAL and is intended for the use of the addressee only. University Hospitals and its affiliates disclaim any responsibility for unauthorized disclosure of this information to anyone other than the addressee.

Federal and Ohio law protect patient medical information, including psychiatric_disorders, (H.I.V) test results, A.I.Ds-related conditions, alcohol, and/or drug_dependence or abuse disclosed in this email. Federal regulation (42 CFR Part 2) and Ohio Revised Code section 5122.31 and 3701.243 prohibit disclosure of this information without the specific written consent of the person to whom it pertains, or as otherwise permitted by law.

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From: (b) (6), (b) (7)(C)
Sent: Wednesday, August 19, 2020 9:25 PM
To: Fowle, Noah
Subject: (b) (6), (b) (7)(C)

Hi Noah,

This is (b) (6), (b) (7)(C) (b) (6), left you a message on your voicemail but wanted me to also email you. (b) (6), (b) (6), (b) (7)(C) is this Saturday and we are also (b) (6), (b) (7)(C) after that. Friday is going to be a bit hectic. (b) (6), was wondering if (b) (6), can have the phone appointment the following week (b) (6), (b) (7)(C); Monday 8/31, Wednesday 9/2 or Friday 9/4.

Thank you,
(b) (6), (b) (7)(C)

.

From: Fowle, Noah
Sent: Wednesday, August 26, 2020 12:34 PM
To: (b) (6), (b) (7)(C)@UHhospitals.org
Cc: Manson, Marcie
Subject: RE: 08-CA-264766 (UH)
Attachments: CHG.08-CA-264766.Signed Charge Against Employer (1).pdf

(b) (6), (b) (7)(C)

Attached is an electronic copy of the above referenced charge (b) (6), (b) (7)(C) told me today you still haven't received a copy). I've cc'd Marcie Manson as (b) (6), (b) (7)(C) also indicated that she would be handling the case. Lastly, my office is currently processing the withdrawal of the charge, however I anticipate that the Charging Party will likely refile the charge shortly.

Noah Fowle
Field Attorney, NLRB – Region 8
1240 E. 9th Street, Room 1695
Cleveland, OH 44199-1086
216 303 7364 (office)
202 674 2311 (cell)
216 522 2418 (fax)
noah.fowle@nlr.gov

From: Fowle, Noah
Sent: Tuesday, August 18, 2020 2:18 PM
To: (b) (6), (b) (7)(C)@UHhospitals.org
Subject: 08-CA-264766 (UH)

(b) (6), (b) (7)(C)

I am the investigating board agent for the above referenced charge, recently filed by (b) (6), (b) (7)(C). Please have your attorney file a notice of appearance, and I will direct all further correspondence through your attorney.

Noah Fowle
Field Attorney, NLRB – Region 8
1240 E. 9th Street, Room 1695
Cleveland, OH 44199-1086
216 303 7364 (office)
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UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

REGION 8
1240 E 9TH ST
STE 1695
CLEVELAND, OH 44199-2086

Agency Website: www.nlrb.gov
Telephone: (216)522-3715
Fax: (216)522-2418

August 31, 2020

(b) (6), (b) (7)(C)

Re: University Hospitals
Case 08-CA-264766

Dear (b) (6), (b) (7)(C)

This is to advise you that I have approved the withdrawal of the charge in the above matter.

Very truly yours,

A handwritten signature in cursive script, reading "Jennifer A. Hadsall", is positioned above the typed name.

JENNIFER A. HADSALL
Acting Regional Director

cc: (b) (6), (b) (7)(C)